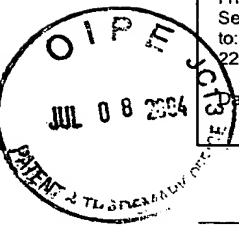


7/12/04

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 378820196 US, in an envelope addressed to: NIS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 8, 2004

Signature:

John S. Curran
(John S. Curran)

Docket No.: PAS-094RCE
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Emmanuel Gerlovin *et al.*

Application No.: 09/318105

Art Unit: 2128

Filed: May 24, 1999

Examiner: H. D. Day

For: PARAMETRIC EXCHANGE OF DATA
BETWEEN A MODELING SYSTEM AND AN
EXTERNAL APPLICATION PROGRAM

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated April 8, 2004, please amend the above-identified U.S. patent application as follows:

Claims are reflected in the listing of claims which begins on page 2 of this paper. The claims have not been amended.

Remarks/Arguments begin on page 6 of this paper.

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**AMENDMENT TRANSMITTAL LETTER**Docket No.
PAS-094RCEApplication No.
09/318105-Conf. #9928Filing Date
May 24, 1999Examiner
H. D. DayArt Unit
2128Applicant(s): Emmanuel GERLOVIN *et al.*


Invention: PARAMETRIC EXCHANGE OF DATA BETWEEN A MODELING SYSTEM AND AN EXTERNAL APPLICATION PROGRAM

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	26	- 26 =		x	0.00
Independent Claims	5	- 5 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

☒ Large Entity☐ Small Entity☒ No additional fee is required for this amendment.☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-0080
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

John S. Curran

Attorney Reg. No.: 50,445

LAHIVE & COCKFIELD, LLP
28 State Street
Boston, Massachusetts 02109
(617) 227-7400

Dated: July 8, 2004

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Dated: July 8, 2004

Signature: 

(John S. Curran)